

Account No.

**NOTICE of CHANGE or DISCONTINUANCE**Check this box if you have not  
received a current set of SUW forms. ☐

LEGAL BUSINESS NAME AND ADDRESS	MAILING NAME AND ADDRESS
CHANGE OUR LEGAL BUSINESS NAME AND ADDRESS TO: (If P.O. Box No., you must include street address)	CHANGE OUR MAILING NAME AND ADDRESS TO:

**All Filers, including EFT Filers are required to file a paper annual return.****Use only if you discontinued or made changes to your business. Complete and mail this form to:****Registration Section, Michigan Department of Treasury, Lansing, MI 48922**

- Our correct federal employer identification number is: \_\_\_\_\_  
We changed to a: \_\_\_\_ LLC \_\_\_\_ Ltd. Partnership \_\_\_\_ Sole Proprietorship \_\_\_\_ Corporation \_\_\_\_ Partnership
- We discontinued our business on : \_\_\_\_\_  
Enter the address where you may be reached after the discontinuance or sale of your business on the front.  
We sold **part or all** (circle one) of our business on: \_\_\_\_\_  
Enter the buyer's name and address: \_\_\_\_\_
- Delete the following taxes or licenses from my registration. To add a tax, you need to complete the appropriate application available on the Treasury Web site: [www.michigan.gov/businesses/tax](http://www.michigan.gov/businesses/tax)  

____ sales tax	____ income tax withholding	____ LPG dealer license
____ use tax	____ motor carrier license	____ gasoline wholesaler's license
____ single business tax	____ diesel dealer license	____ motor fuel tax license or exempt. certificate
		____ tobacco products tax license
- Our corporate name has changed or is different from the one printed on the front.  
Enter the correct name on the front.
- Our seasonal business is now open during these months: \_\_\_\_\_
- Attach any information explaining any other changes you may have had (mergers, etc.).
- These changes are effective for this date: \_\_\_\_\_

Preparer's Signature	Telephone Number	Date
----------------------	------------------	------